

SAMPLE MAPPINGS FOR #2 NEBRASKA FORM 86: COMPRESSED FUEL RETAILER RETURN

TRANSACTION SET HEADER EXAMPLE #2

Notes: Please reference the attached sample form to compare to this EDI mapping.

The Header contains only required data from the Form 86. This includes Line 8, identification, and address information. Other line items are either in the Detail portion or are not captured.

```
1  ST~813~0005\  
2  BTI~T6~NE86~47~NE16~20000219~ABC(space)~24~474567890~49~1234567~~~00~\  
3  DTM~194~20000131~~~\  
4  TIA~5067~~1000\  
5  TIA~5025~~~0\  
6  N1~TP~ABC IMPORT COMPANY\  
7  N3~123 7TH STREET~\  
8  N4~ANYTOWN~NE~68333~US\  
9  PER~EA~DELORES BROWN~TE~4025557532~FX~4025557531~EM~DBROWN@ALO.COM\  
10 PER~CN~JANE J. SCHMIDT~TE~4025556798~~~~~\  

```

FORM 86: TRANSACTION SET DETAIL EXAMPLE #2

Notes: The Detail contains only the REF, for No Activity. In this example, the TFS segment is coded to indicate that no schedules are used.

```
11  TFS~T2~NE86\  
12  REF~BE~1  

```

FORM 86: TRANSACTION SET DETAIL EXAMPLE #2

Notes: The Trailer “SE” segment counts the number of segments within the ST-SE loop, including the ST and SE. The SE also contains a control number that ties it to the ST.

```
13  SE~13~0005\  

```



Federal Employer Identification Number 47-4567890 Tax Period January 2000 Nebraska Identification Number 1234567

If your payment is being made by Electronic Funds Transfer, check here. ☐

ABC IMPORT COMPANY
123 7TH STREET
ANYTOWN NE 68333

ABC IMPORT COMPANY
123 7TH STREET
ANYTOWN NE 68333

Nebraska Compressed Fuel Retailer Return

• Read instructions below

PLEASE DO NOT WRITE IN THIS SPACE

FORM ▲

86

☐ Check this box to **CANCEL**.
Attach license and indicate effective date _____

• ROUND TO WHOLE GALLONS AND DOLLARS. Round down all amounts less than .50 and round up all amounts .50 through .99.

	COLUMN 1 PROPANE	COLUMN 2 CNG	COLUMN 3 OTHER
1 Total gallons of fuel sold in Nebraska for all purposes	0	0	0
2 Total gallons of fuel reported on line 1 sold for use in a licensed motor vehicle	0	0	0
3 Total gallons of fuel reported on line 2 sold to federal agencies	0	0	0
4 Total gallons of fuel reported on line 2 sold on a Nebraska Indian Reservation to Native Americans	0	0	0
5 Total exempt gallons (line 3 plus line 4)	0	0	0
6 Total gallons subject to tax (line 2 minus line 5)	0	0	0
7 Total taxable gallons (total of line 6, columns 1, 2, & 3)			0
8 Total fuel tax (line 7 multiplied by .241)			\$ 0 00
9 Commission (.0175 on first \$5,000 PLUS .0025 on excess over \$5,000)			0 00
10 Fuel tax due (line 8 minus line 9)			0 00
11 Previous balance			00
12 BALANCE DUE (line 10 plus line 11)			\$ 0 00

Under penalties of law, I declare that I have examined this return, and to the best of my knowledge and belief, it is correct and complete.

sign
here

Janet Schmidt
Authorized Signature
Secretary
Title

(402 555-6798)
Telephone Number
2-19-2000
Date

Signature of Preparer Other than Taxpayer
Address

()
Telephone Number
Date

INSTRUCTIONS

WHO MUST FILE. Every motor fuels retailer who sells compressed fuel is required to file a Nebraska Compressed Fuel Retailer Return, Form 86, each quarter for the first year of operation. **File only the original, preidentified return issued by the Motor Fuels Division.** If the name and address

is incorrect, mark through the erroneous information and plainly print the correct information.

WHEN TO FILE. This return is considered timely filed if postmarked on or before the 20th day of the month following

THIS RETURN IS DUE ON OR BEFORE THE 20TH DAY OF THE MONTH FOLLOWING THE TAX PERIOD INDICATED ABOVE.

Mail the original return to: **MOTOR FUELS DIVISION, P.O. BOX 98904, LINCOLN, NE 68509-8904**